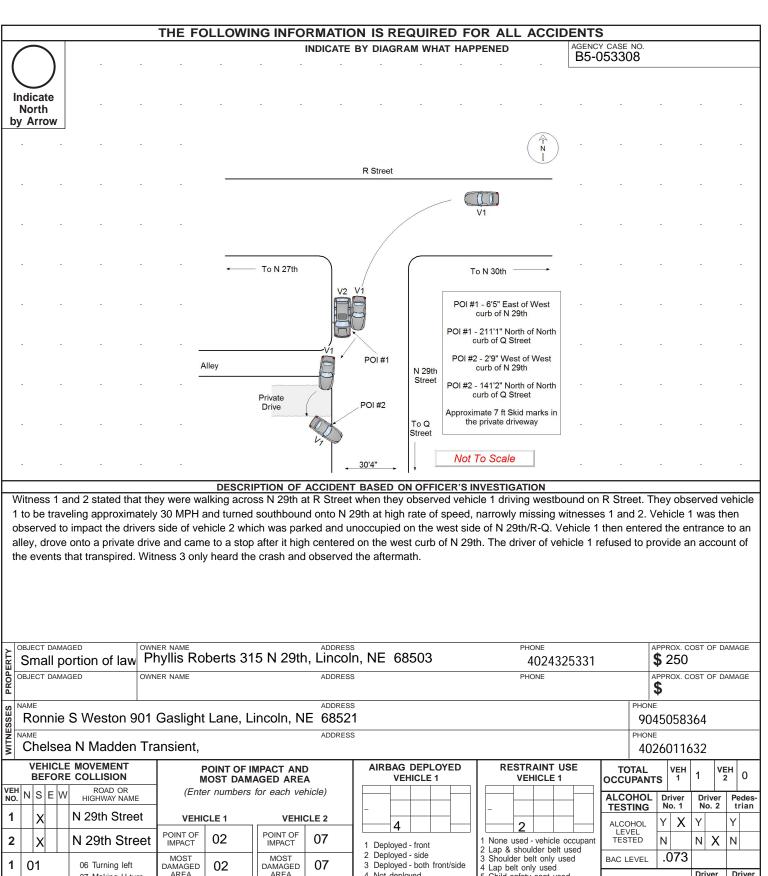
215023461 49311			State of Ne		Mo	tor Ve	hicl	e A	ccide	en	ıt Re	eport		Shee	et _1	of	4		
2	Total Num of Vehicle	Dei ID	ocal No./ estrict 031		Agency Case No. B	5-053308				ı	HIT & RUN		2	INVESTIGATION MADE AT SCENE XYES NO					
A/1 01 A/2	OF ACCIDENT	M M 06/15/2	S M T W TH F S											STATE USE ONLY					
В	OF ACCIDENT CI	ITY L	Lincoln									YES NO		06/16/2015					
65	ROAD ON N	STREET/ HIGHWAY N	o. N 29th					ONE-WAY	YES NO	LATITUDE	LATITUDE								
с 4	DISTANCE FR	OF MILEPOST			HIGHV	VAY I	STREET? NO.	<u> </u>	LONGITU	LONGITUDE									
D	IF AT INTERSECTION IF NOT AT INTERSECTION																		
1		1.00		N S	E		earest stre Street	et, bridge	E, RAIL	ROAD (CROSSIN	G							
V1/M 10 V2/M	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN MILES N S E W AND MILES N S E W OF NEAREST CITY OR TOWN																		
01 E	R. WORK R1 R2 R3 R4 S. PEDESTRIAN S1 S2 S3 S4 S5-a S5-b CLASSIFICATION								a S5-b	S6-a	S6-b	DOES ACCIE STATE DEPT							
2		CODES VEHICLE NO. 1										YES X NO							
f 1	DRIVER LICENSE NO. H13635329 DRIVER PHO											STATE (Of License	NE LOCAL N		EX 🔾	FEMALE			
V1/N 1	BRYAN J Mercado DRIVER ADDRESS CITY, STATE, ZIP DATE OF													V1/1					
V2/N 1	5818 Madison #2, LINCOLN, NE 68507 BIRTH 12/26/1													19					
G	Nolberta OWNER ADDRESS	Nolberta Mercado 4026133177												07-18-1965					
2		1311 Byers Avenue, Joplin, MO 64804 PENDING NO										LB47	LB477932 STATE			37 V1/3			
н 5	PLATE P	A NO	NO. WH4M1A YEAR MAKE MODEL BODY STYLE COLOR									2015	ESTIMATED	(Of P	late)	МО	V1/4		
V1/O	VEHICLE	1997 Ford Mustang 2 door Sedan									black TOTALED \$ 2000						V1/5		
3 V2/O	VEHICLE ID NO. (VIN) 1FALP4446VF149844 Viking Insurance TOWED TO TOWED BY POLICY NO.										е								
2	1st and Ch	harles	ton			al Towing					1	82220					V1/6 25		
1	DRIVER					VE	HICLE	NO. 2				STATE (Of License		S	EX S) FEMALE			
V1/P	DRIVER	ICENSE NO.							PHONE			<u> </u>	LOCAL NO.						
6 V2/P	DRIVER ADDRESS		<u>л</u>		CITY,	STATE, ZIP						DATE OF					- V2/1 18		
1	OWNER DEPORAL	OWNER DEBORAH S KERNS								170	1.470	BIRTH (MM / DD / YYY	LOCAL N	V2/2					
J 01	OWNER ADDRESS			4024		1473	Ç YES	08-0	V2/3										
01 V1/Q	325 N 29th		DINICEC	NE 6850	13			PE YEAR				NG ⊗NO 2015		STA	TE	NE	V2/4		
1	PLATE	YEAR		MAKE	MODEL		BODY STY			COLOR ES		ESTIMATED		E .		-			
V2/Q 3	VEHICLE ID	4 = 0.45	2006 Ford Explorer Medium/large									E COMPANY	○ TOTAL	TOTALED \$ 1000					
К	NO. (VIN) TOWED TO	o. (VIN) TFWEU74E86ZAUTT5 Geico ED TO TOWED BY POLICY NO.).							
01	Complete this section for all injured persons DATE OF BIRTH									1	2	3	4	25 5 SEX					
VEH. #		(Comple	ete a continuati	on report, if m	nore than to	hree were inju	ıred)					DD / YYYY)	Seat Positio	n Eject	Body Region	n Sev. T	rans. M F		
	LOCAL NO. MEDICAL FACILITY NAME							RVICE NAM	15				EMS DI	EMS RUN REPORT NO.					
		IV	ILDIOAL FACILITY				LIVIO OF	-IVIOE NAN	·-				EIVIS KI	ON REP	OKT NO.				
VEH. #	NAME			ADI	DRESS														
	LOCAL NO.	N	IEDICAL FACILITY I	NAME			EMS SE	RVICE NAM	IE	•			EMS RI	JN REP	ORT NO.		-		
VEH. #	NAME	1		ADI	DRESS		1												
	LOCAL NO.	N	EDICAL FACILITY I	NAME			EMS SE	RVICE NAM	1E				EMS RI	JN REP	ORT NO.				



Driver No. 2 AREA AREA 5 Child safety seat used 6 Child booster seat used Drive No. 1 Not deployed 07 Making U-turn ALCOHOL/ Not applicable/ 2 08 Entering traffic lane 10 **DRUGS** 2 DOT approved helmet used 1 No airbag available 00 None SUSPECTED 03 8 Costume helmet used Unknown 09 Leaving 01 Essentially 09 Top & windows 9 Restraint use unknown straight ahead 1 Neither alcohol nor drugs suspected traffic lane 10 Undercarriage VEHICLE 2 **VEHICLE 2** 01 05 2 Yes - alcohol suspected 02 Backing 10 Parked 11 Total (all areas) 3 Yes - drugs suspected 03 Changing lanes 11 Slowing or 12 Other stopped in traffic 04 Overtaking/ 4 Yes - alcohol & drugs suspected 07 06 08 Passing 12 Other 5 Unknown 05 Turning right 13 Unknown OFFICER NO. TROOP TEAM/ DEPARTMENT X YES **Photographs** NE 1716 Lincoln Police Department taken? INVESTIGATOR NAME (Print or Type) INVESTIGATOR SIGNATURE DATE OF 06/16/2015 Kevin Meyer Approved by Officer Kevin Meyer REPORT

	15023 9311	461				Moto	r Vehic	le A	ccider	nt Co	ontii	nuatio	on Rep	ort	Shee				_
				Local No./ District 031				Agency Case No.	B5-053	308						STAT	E USE O	NLY	
Vehicle Codes from		06/15/2015 OF						Lar	caster										
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		00.7		MOST DAMAGED)	MOST DAMAGED	,	3 Dep	oloyed - side oloyed - both	front/side	4 La	houlder belt ap belt only	used	BAC	LEVEL				
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ADDITIONAL - DIAGRAM & INFORMATION AS REQUIRED FOR ACCIDENT																		
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North by Arrow																		
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MI																		
OFFICER NO.			TROOP/ TEAM/ BEAT N I				DEPARTME Lincol	n Polic	e Depa	ırtment								
INVESTIGATOR	NAME (Print o	or Type)	1		IN	VESTIGATO	R SIGNATU		- 1-0									
Kevin M	,	Approv	ed by (Officer	Kevin I		DATE OF REPORT	06	/16/201	5								